



division of  
**Human Resource  
Management**

## Abusive Conduct Intake Form

To file a complaint of Abusive Conduct, a completed copy of this form must be sent to: Department of Human Resource Management Administrative Office, 4315 S 2700 W, SUITE # 2100 SALT LAKE CITY, UT 84184  
FAX: 801-538-3081 Email: bkembley@utah.gov phone: 801-618-6720

***\*Note: This form is for the purpose of reporting Abusive Conduct, consistent with DHRM Rules R477-16. If you would like to make a complaint of Workplace Harassment (as described in DHRM Rules R477-15), please contact your HR Specialist.***

Name:

EIN #:

Phone:

Email Address:

Employer Department or Agency:

Work Location:

**Please describe the nature of the alleged abusive conduct:**

**When did the alleged abusive conduct occur?**

**Was this an isolated incident, or an ongoing occurrence? Please explain.**

**Did anyone else witness the alleged abusive conduct?**

**What type of resolution or are you seeking?**

Employee Signature:

Date: